Best Available Copy

DATENT ADDITION SEE DETERMINATION SECO								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2001									552.	11	(U	SCi	
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			43				RAT	E	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			ं4८ minus 20=		*	23	X\$ 9	X\$ 9=		OR	X\$18=	4/4	
INDEPENDENT CLAIMS			7 minus 3 =		* 4		X42=			OR	X84=	336	
MUI	LTIPLE DEPEN	DENT CLAIM PI	RESENT				+140=			1 1	+280=	774	
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTA		<u></u>	OR OR	TOTAL			
CLAIMS AS AMENDED - PART II								`		JOH	OTHER	THAN	
(Column 1) (Column 2) (Column 3)							SMALL ENTITY		OR	SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDW	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=		
AME	Independent	*	Minus	***		=	X42	=		OR	X84=		
	FIRST PRESE	NTATION OF MI	JUTIPLE DEF	PENDENT	CLAIM		+140	_		OR	+280=		
							TO	TAL			TOTAL		
(Column 1) (Column 2) (Column 3)								EE		J /	ADDIT. FEE		
DMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=		
AMEN	Independent	*	Minus	***	5 01 4144	=	X42:			OR	X84=		
	FIRST PRESE	NTATION OF MU	JUIPLE DEF	ZENDEN	CLAIM		+140	=		OR	+280=		
								EE		OR	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3)												
AMENDMENT C	a parama	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATI	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	*	Minus	**	<u>.</u>	=	X\$ 9	=		OR	X\$18=		
AME	Independent	* NTATION OF M	Minus	***	T CL AIA	=	X42:	-		OR	X84=		
Ш	THOU FRESE	INTATION OF MI	OLITE DE	ENDEN	CLANV		+140	_		OR	+280=	1	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest of the paid for the pai								AL EE			TOTAL ADDIT. FEE		